

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

APPLICANT

FILED DATE

10/552448 10/6/05

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
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TOTAL RHS			←	←	←	←
TOTAL CLMS		10				

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
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TOTAL RHS			←	←	←	←
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Best Available Copy